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\*\* CONTINUING DATA \*\*\*\*\*

*none TOL*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none TOL*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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|   |  |                        |                       |                            |
|---|--|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY<br>MI                  | SHEETS<br>DRAWING<br>5 | TOTAL<br>CLAIMS<br>21 | INDEPENDENT<br>CLAIMS<br>2 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |  |                        |                       |                            |
| Verified and<br>Acknowledged  | Examiner's Signature<br><i>[Signature]</i> | Initials               |                       |                            |

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## TITLE

DOD control methods for manual transmissions

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|----------------------------|---|--|
| FILING FEE<br><br>RECEIVED | FEEs: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
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